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Presenting a Strategic Model for The Development of Health and Lifestyle in Women Using the Approach of Sports Social Marketing

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A B S T R A C T

The current research was conducted with the aim of explaining the role of social marketing of sports in the development of health and healthy lifestyle. The current research is based on the purpose of exploratory research, a mixed approach (qualitative-quantitative) and in terms of the foundation's data strategy. The statistical population of the research included the elites, professors and senior and middle managers of the line and staff areas of the deputy of sports and health and the ministry of sports and youth, as well as the heads of their public sports committees and the officials of sports in the field of health. Open, axial and selective coding was used to analyze the data, and this process was carried out in Maxqda software version 2020. The obtained results showed that the main category of factors affecting social marketing with the approach of women's health and lifestyle development, consists of 5 subcategories "level of health literacy", "environmental factors", "psychological factors", "the place of exercise in a person's life" and performing physical activities" and "cultural and social conditions"; The main category of social marketing strategies with the approach of women's health and lifestyle development, consisting of 3 subcategories "operational strategies", "technical strategies" and "inter-organizational operational strategies" and the main category of social marketing consequences with the approach of women's health and lifestyle development, It consists of 6 subcategories of "social health", "change in behavior", "economic consequences", "cultural consequences", "psychological consequences" and "physical consequences". It seems that sports social marketing with the approach of developing women's health and lifestyle in general improves the social health of society. The manifestation of this social health can be seen in the development of people, especially in sports, increasing identity, participation, acceptance, cohesion, prosperity and social solidarity, respect for the rights of others, strengthening group spirit, rule of law, strengthening social relations, social responsibility and internalizing norms. Socially observed.

Keywords: social marketing, health development, lifestyle, facilitating physical activity tools, positive perceptions of physical activity, media literacy, information sources

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Introduction

Today, physical inactivity and the lack of engagement in physical activity among the population are increasingly considered major concerns in health-oriented research. Physical inactivity is a leading cause of chronic diseases such as cardiovascular diseases, cancer, and diabetes, and problems associated with physical inactivity lead to the deaths of 3.2 million people annually (Haroga/Fujihara, 2022). The World Health Organization states that one out of every four adults is not sufficiently active, and evidence shows that a reduction in physical activity—especially with increasing age—is occurring among all groups (World Health Organization, 2015). On the other hand, overweight and obesity among young people are increasing; in 2014, 39% of young Australian adults were above a healthy weight. Low awareness of obesity risk factors, the absence of effective preventive interventions, and poor use of the healthcare system cause this age group to face challenges in engaging in health-promoting behaviors (Dix et al., 2022).

In order to develop effective health-promotion campaigns for individuals, it is important to understand the various barriers and facilitators involved in adopting different practices, including lifestyle, attitudes, and other psychological-behavioral characteristics that shape behavior (Black et al., 2018). Communities around the world face many challenges related to health development and lifestyle, which increases the importance of efforts aimed at changing social behaviors (Sonya Grier & Carol Bryant, 2022). One of the new fields that is currently used by many developed countries to address social issues and problems is social marketing (Martin Key, 2017).

Social marketing refers to the use of marketing to design and implement programs aimed at promoting socially beneficial behavior. It has gained particular popularity in enhancing social health development. In recent years, the Centers for Disease Control and Prevention, the United States Department of Agriculture, the United States Department of Health and Human Services, and other governmental and nonprofit organizations have used social marketing to increase fruit consumption, promote vegetable consumption, encourage breastfeeding, reduce fat consumption, strengthen physical activity, and influence a wide range of other preventive health behaviors (Andersen, 2001). State and local communities use social marketing to increase participation in nutrition and supplemental food programs for women, infants, and children, prenatal care, low-cost mammography, and other healthcare services (Andersen et al., 2002).

Social marketing is a new approach that, since 1971, has entered the field of marketing as an approach for addressing societal problems, including health and environmental issues (Looking et al., 2017). Considering the various definitions provided for social marketing, it can be understood that social marketing is the application of commercial marketing principles to solve social problems and challenges (Eagle, 2017). Social marketing employs a set of tools—people, product, price, promotional activities, and place—with the ultimate goal of changing the behavior of target audiences (Eagle et al., 2017: 330; Samponga et al., 2017). Moreover, in behavioral discussions, it is argued that if an action can be institutionalized in an individual's behavior, a stable pattern of that behavior can be observed in the person. For this reason, in order to create behavioral change in individuals, theories of behavior change must be considered so that a model can be developed to achieve the intended goal, namely the creation of desirable social behavior (Donovan & Henley, 2010).

The unique feature of social marketing is that it draws lessons from the commercial sector and applies them to solve social and health problems. Four main characteristics are reflected in this definition. The first is a focus on voluntary behavior change. The second is that social marketers attempt

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to induce change through the principle of exchange, recognizing that if change is to occur, there must be a clear benefit for the customer. Third, marketing techniques such as consumer market research, segmentation, and targeting are used, along with the marketing mix. Finally, the ultimate goal of social marketing is to improve individual and community well-being. This is what distinguishes social marketing from other forms of marketing (McFadden, 2002).

Participation in sports activities under the title of sport for all leads to the understanding and transmission of social values, acceptance of social responsibility, manifestation of social personality, the ability to establish social relationships, the emergence of social talents, respect for social laws, confrontation with social corruption and injustice, social solidarity and balance, social judgment and management, and health development through improved quality of life. Sport and physical activity provide young people with a positive lifestyle, promote self-development, and prevent abnormalities such as alcohol consumption, drug and tobacco use, aggression, and violence. Sports activity teaches individuals how to live properly and healthily and strengthens teamwork in the individual (Kashkar, 1386/2007).

In this regard, sports activities, as a broad domain of sport, have great potential for achieving the aforementioned goals and benefits. According to the definition provided by the University of Michigan, sport for all is defined as comprehensive and extensive programs and activities for all ages, both genders, and people of different races, religions, and abilities. The domain of sport for all includes physical activity, leisure-time activity, recreational activity, indigenous and local sports and games, and activities during travel, such as tourism and ecotourism. It functions as an umbrella concept focusing on different domains of sport. Sport for all means sport for everyone; it includes physical activities ranging from unstructured and spontaneous indigenous games to regular physical exercises. It includes morning exercise, activities in parks and open spaces, mountain climbing, and physical fitness classes, and generally refers to noncompetitive, low-cost or free group sports (Saberi et al., 2017).

The low rate of public participation in recreational and sport-for-all activities is recognized as a social problem with cultural, structural, legal, and managerial roots, which has challenged healthy lifestyles (Hallmann, 2017). To date, only a limited number of studies have attempted to integrate existing knowledge in order to identify the factors that lead to the success or failure of social marketing interventions aimed at increasing physical activity (Stead et al., 2007).

According to the findings of Finla et al. (2017), social marketing, through tools such as the cost of participation instead of price, accessibility instead of place, social communication instead of promotion, and finally offering desirable behavior instead of product, has the ability to replace incorrect and high-risk behaviors—such as consuming sugary and harmful soft drinks—with healthy behaviors such as consuming low-fat milk. They demonstrated this clearly in their research (Finla, 2017: 147). Ramirez et al. (2017) also emphasized in their research the positive role of social marketing in changing harmful behaviors and transforming them into beneficial health-related behaviors. They considered the success achieved in the food industry and in proper consumption patterns to be generalizable to areas such as physical activity and regarded research in this area as necessary (Ramirez, 2017).

Furthermore, Lee et al. (2016) considered social media and related activities such as advertising to be effective factors in launching social marketing. Through this path, they envisioned many benefits arising from new opportunities created by useful behavior change aligned with society. They believe that proper behavior change through social marketing will create unique commercial marketing

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opportunities and will also significantly reduce the existing uncertainty in the market (Tang et al., 2016). Nagla (2010) states that social marketing can create opportunities in the field of sport for all and recreational sport, through which individuals' quality of life can be improved.

Khodadad Hosseini et al. (1394/2015) effectively demonstrated the impact of social marketing on behavior change among football fans and emphasized the importance of social marketing in changing behavior in line with the interests of society (Khodadad Hosseini, 2015). Accordingly, it can be assumed that if public participation in sport in the country increases through social marketing, and if social marketing techniques and social media are used effectively in this process, the sports business sector may flourish. Sports-related occupations such as sports clothing, human resource training—including coaches, referees, and others—training of sports interns, and similar fields may experience significant growth. All of these depend on increasing public participation in sport (Kim, Liu, & Shine, 2017).

According to the findings of Abdul Aziz et al. (2008), who launched various campaigns related to social marketing, social marketing has led to positive behavioral changes in encouraging people to engage in physical activities. In this regard, in a study conducted on obesity and ways to combat it among children, they implemented the "1-2-3-4-5 Move" campaign using social marketing. The results showed that social marketing, by involving parents and young people, successfully conveyed its main message regarding the instillation of correct behavior and encouragement of physical activity among children and adolescents. After the completion of the educational process, young people, as ambassadors of the campaign, transmitted the social marketing message to other communities (Abdul Aziz et al., 2008).

The results of a study conducted in England in 2008 showed that individuals living in deprived neighborhoods and suffering from severe overweight participated in sport for 12 weeks through social marketing programs, including walking, swimming, training classes, and a 50% discount for public leisure centers and private clubs. The results showed that 60% of the participants stated that they would continue leisure programs related to physical activity (Saberi et al., 2017).

In another study that used social marketing to attract deprived and low-income groups toward participation in sport-for-all activities, the results showed that the use of leisure cards—or recreational cards—was effective. These cards were designed to provide all residents of deprived areas with access to recreational or leisure opportunities, as well as to reduce prices for eligible groups, especially recipients of regional benefits and older and more important citizens. In some cases, separate cards were also used. These leisure cards are mechanisms that can resemble commercial benefit providers while also creating social benefits for disadvantaged groups. This approach led to an increase of approximately 55% in participation in physical activities in these areas (Collin, 2011).

Low public participation in recreational and sport-for-all activities, and the failure to release people's energy in a positive way, may lead to unhealthy behaviors and severe consequences that will affect the entire society. In this study, the researchers sought to investigate the issue of low participation in sport-for-all activities from a new perspective. It is hoped that social marketing can provide an appropriate and effective solution to the problem of low participation in sport within society and answer the question: How can social marketing in sport contribute to the development of health and a healthy lifestyle among citizens?

Methodology

The present study is considered a postmodern study in terms of its paradigm. The researcher evaluated and examined the research problem based on a postmodern assumption and selected a qualitative

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approach to solve the problem. In terms of strategy, the present research is a grounded theory study and, using the Glaserian approach (Heath et al., 2004), attempted to design a model. The nature of the present study is developmental–exploratory.

The participants of this study included elites, professors, senior and middle managers in line and staff departments of the Deputy Office for Sport and Health, the Ministry of Sport and Youth, heads of provincial sport-for-all associations, and officials in the field of health-related sport. Using purposive sampling, 15 individuals were selected as the research sample.

The data collection method consisted of in-depth and semi-structured interviews. These interviews were collected in text and audio formats in coordination with the research participants. The researcher then coded the conducted interviews in order to identify the categories, characteristics, and dimensions of the interview data. This coding process was carried out using MAXQDA software, version 2020.

It is important to note that a preliminary list of interview questions was prepared as the initial data collection tool. This list was then sent to each expert before the interview as an interview guide. The initial interview questions were developed based on the research background and the intended objectives. These questions were presented to the sample members in different sequences, and depending on the interview conditions, additional questions were also added.

The interviews began with a description of the demographic characteristics of the interviewees, followed by the main research questions. At the end, the interview concluded with an open-ended question such as: “Do you think there is anything in this area that has not been addressed?” The researcher continued the interviews by asking questions about the dimensions, components, and indicators of effective sports social marketing related to lifestyle and health until theoretical saturation was achieved regarding the research questions and objectives.

After reaching theoretical saturation concerning the strategic model for health and lifestyle development through social marketing, the researcher analyzed the interviews through open and axial coding. In this regard, Guba and Lincoln (1994) stated that a carefully conducted study, in which sample selection is evolutionary and sequential, will reach theoretical saturation with approximately 12 participants, and this number will probably not exceed 20 participants (Guba & Lincoln, 1994, p. 163). Borgo et al. (2009) stated in their study that in in-depth interviews, 25 participants are needed before reaching the saturation point. In practice, the concepts of theoretical saturation and diminishing returns, which are considered in qualitative sampling, must be balanced against limitations such as time, money, and other factors (Borgo et al., 2009, p. 53).

The researcher analyzed and coded the interviews collected during the fieldwork according to the order in which they were collected in each time interval. Based on the feedback received from each interview, the subsequent interviews were modified. At this stage, the data were examined line by line, and the audio files were listened to repeatedly. By attaching codes to the data, maintaining openness in coding, and observing the results of the data, the researcher attempted to extract the categories, concepts, and strategic indicators of “sports social marketing affecting health and lifestyle.”

Morse et al. (2002) suggested factors such as accurate sample selection, simultaneous data collection and analysis, and methodological coherence to ensure the validity and reliability of qualitative research. These issues were also observed by the researcher in the present study.

In addition, using the recoding method, 20% of the interviews and documents were coded again by

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another researcher from the research group. Using Scott's formula, the agreement coefficient was calculated as 78%. The method of calculating recoding agreement between the codes assigned by the researcher was as follows: among the conducted interviews, 20% were randomly selected, including four interviews. Each of these interviews was coded twice by another researcher from the research group at a 30-day interval. In this regard, Stemler (2000) explained in his study that reliability above 60% is confirmed and acceptable (Stemler, 2000). The results obtained from recoding are presented in Table 1.

Table 1. Calculation of Interview Reliability Using the Recoding Method

No.	Interview Code	Total Number of Codes	Number of Agreements	Recoding Reliability (%)
1	P2	21	16	76%
2	P5	19	16	85%
3	P8	24	18	75%
4	P14	14	11	79%
Total		78	61	78%

As shown in Table 1, the total number of codes in the two 30-day intervals was 78, and the total number of agreements between the codes in these two intervals was 61. The recoding reliability of the interviews conducted in this study, using Scott's formula, was 78%. Since this reliability value is higher than 60% (Stemler, 2000), the reliability of the coding is confirmed and acceptable. In order to achieve the validity of the extracted indicators and codes, several interview participants who were university faculty members reviewed the coding process, and their views regarding the coding stages were applied. In addition, two professors of sport management—the supervisor and advisor—examined the findings and commented on the various stages of coding.

Table 2. Characteristics and Dimensions of the Participants in the Qualitative Section of the Study.

No.	Education	Experience	Position/Title
P1	PhD	10 years	Physical Education Expert, General Department of Tehran City
P2	PhD	10 years	Professor, Physical Education Research Institute, Tehran
P3	PhD	8 years	High School Principal, Karaj
P4	PhD	8 years	Faculty Member, Islamic Azad University, Qazvin
P5	PhD	10 years	Principal of Shahed High School
P6	PhD	2 years	Faculty Member, Islamic Azad University, Karaj
P7	PhD	4 years	Faculty Member, University of Tehran
P8	PhD	5 years	Researcher in Social Marketing and Vice President of the Women's Gymnastics Board
P9	PhD	10 years	Researcher in Sports Marketing
P10	PhD	10 years	Faculty Member, Research Institute
P11	PhD	5 years	Physical Education Teacher and Researcher
P12	PhD	5 years	Physical Education Teacher
P13	PhD	11 years	Physical Education Teacher and Researcher
P14	PhD	8 years	Expert at the Ministry of Sport
P15	MBA Master's Degree	12 years	Risk Management and Marketing Expert

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After analyzing and breaking down the meaningful units, 201 initial statements with a frequency of 278 were extracted and identified in the sections of influential factors, strategies, and consequences of social marketing with a health-development approach. Therefore, the total number of initial statements was 165. Through repeated examination of the text and by applying the opinions of the supervisor and advisor, codes with repetitive, ambiguous, or irrelevant themes were removed from the set of codes. Finally, these 165 initial statements, with a total frequency of 221, were prepared for categorization and formation of categories.

Based on the results of content analysis of the interviews conducted with the research experts, five main categories and 18 concepts were extracted from the classification of initial codes in the section of "factors affecting social marketing with a health-development approach among women." These included:

1. Level of health literacy, including the concepts of:

- media literacy,
- information sources,
- social factors,
- individual knowledge.

2. Environmental factors, including the concepts of:

- demographic factors,
- individual lifestyle,
- personal growth.

3. Psychological factors, including the concepts of:

- motivational factors,
- psychological variables,
- positive self-perceptions.

4. The place of sport in an individual's life, including the concepts of:

- facilitators of physical activity,
- access and equipment,
- tendency to engage in physical activity,
- habit of physical activity,
- positive perceptions of physical activity.

5. Cultural and social conditions, including the concepts of:

- family,
- environmental conditions,
- economic status.

In the section of "strategies affecting social marketing with a health-development approach among women," three main categories and eight concepts were discovered and extracted:

1. Operational strategies, including the concepts of:

- planning,
- service provision,
- advertising and awareness-raising.

2. Technical strategies, including the concepts of:

- activities of governmental bodies and nonprofit organizations,
- identification of target audiences.

3. Inter-organizational operational strategies, including the concepts of:

- cooperation between the sport sector and the health and treatment sector,
- participation in decision-making,

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o interaction and cooperation among organizations.

In the section of consequences of health development with a social marketing approach among women, six main categories were extracted:

1. Social health
2. Behavioral change
3. Economic consequences
4. Cultural consequences
5. Psychological consequences
6. Physical consequences.

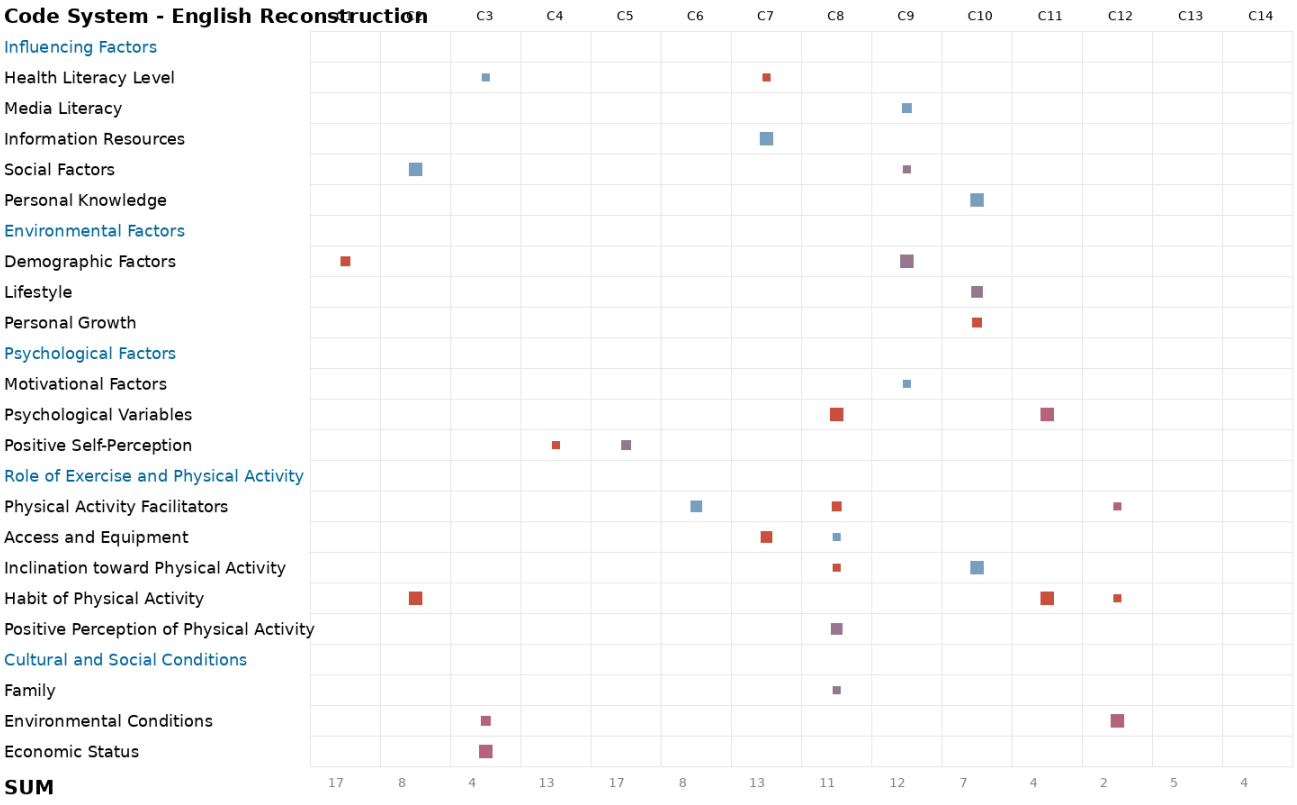


Figure 1. Shannon Matrix of the Extracted Categories.

As observed in the Shannon matrix (Figure 1), the factors related to the level of health literacy included four concepts: media literacy, information sources, social factors, and individual knowledge, with importance coefficients of 4, 6, 4, and 4, respectively.

The environmental factor included three concepts: demographic factors, individual lifestyle, and personal growth, with importance coefficients of 7, 8, and 9, respectively.

The psychological factors included motivational factors, psychological variables, and positive self-perceptions, with importance coefficients of 4, 6, and 5, respectively.

The factor of the place of sport in an individual's life and engagement in physical activities included the concepts of physical activity facilitators, access and equipment, tendency to engage in physical activity, habit of physical activity, and positive perceptions of physical activity, with importance coefficients of 5, 4, 8, 9, and 4, respectively.

The factor of cultural and social conditions included the concepts of family, environmental conditions, and economic status, with importance coefficients of 7, 10, and 6, respectively.

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Table 3. Main Categories and Extracted Concepts Regarding Factors Affecting Social Marketing with a Health and Lifestyle Development Approach.

Initial Statements	Concepts	Main Category
Ability to create messages; level of agreement with media; level of trust in media; level of media use	Media literacy	Level of health literacy
Consultation with specialists; media content analysis; role of peers in providing information; role of family in providing information	Information sources	Level of health literacy
Place of residence and participation in activities; income level of individuals and families; individuals' status relative to the poverty line in society; social class of individuals and families	Social factors	Level of health literacy
Prior knowledge of individuals; language skills; technological skills; communication skills	Individual knowledge	Level of health literacy
Ethnicity and race; education level of individuals and families; marital status; gender; age conditions	Demographic factors	Environmental factors
Proper nutrition; avoidance of illicit relationships; proper sleep habits; avoidance of tobacco use; knowledge and awareness of lifestyle	Individual lifestyle	Environmental factors
Field of study; individual and social hygiene; physiological factors; acquisition of life skills; cultural and religious identity	Personal growth	Environmental factors
Social interactions; maintaining health and physical fitness; strengthening body and mind; gaining vitality and happiness	Motivational factors	Psychological factors
Positive body image; absence of mental illness, especially depression; satisfaction of needs and emotions; provision of psychological welfare and comfort; fulfillment of interpersonal relationship needs; self-control	Psychological variables	Psychological factors
Body control and monitoring; individual vitality; life satisfaction; lack of dependence on others; feeling good	Positive self-perceptions	Psychological factors
Sports coaches; physicians and nurses; favorite athletes; television; family	Facilitators of physical activity	Place of sport in individual life and engagement in physical activities
Existence of a suitable environment for walking and exercise; availability of accessible welfare facilities through walking; pleasantness of sports spaces and facilities; easy access to sports venues	Access and equipment	Place of sport in individual life and engagement in physical activities
Individual feelings toward physical activity; occupation; number of family members; education; marital status; age; gender; habit of physical activity	Tendency to engage in physical activity	Place of sport in individual life and engagement in physical activities
Absence of physical problems, such as physical disability; importance of physical activity; beliefs and attitudes toward physical activity; participation in physical and sports activities; development of a continuous daily activity habit; habit of physical activity at work	Habit of physical activity	Place of sport in individual life and engagement in physical activities
Desire to have an ideal body; awareness of the psychological benefits of physical activity; awareness of the physical benefits of physical activity; positive attitude toward physical activity	Positive perceptions of physical activity	Place of sport in individual life and engagement in physical activities
Parental permission to participate in sport; literacy and education level; family lifestyle; family interactions and functioning	Family	Cultural and social conditions

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Role of friends in engaging in sport; social support; poor social conditions; family responsibilities, such as caring for parents or siblings; urban or rural life; individual's social class; conformity of behavior with social norms and environmental acceptance; changes in the social environment	Environmental conditions	Cultural and social conditions
Facilities such as money or difficulty commuting to a gym or playground; economic level of society; income level; type of occupation	Economic status	Cultural and social conditions

Facilities such as money or difficulty commuting to a gym or playground; economic level of society; income level; type of occupation Economic status Cultural and social conditions

The results of the Shannon matrix show that among the extracted concepts, the concept of activities of governmental bodies and nonprofit organizations, with an importance coefficient of 14; advertising and awareness-raising, with an importance coefficient of 9; and planning and identification of target audiences, each with an importance coefficient of 7, had the highest frequencies among the other concepts.

The matrix also shows that operational strategies had an importance coefficient of 22, technical strategies had an importance coefficient of 21, and inter-organizational operational strategies had an importance coefficient of 15. Overall, the total importance coefficient of social marketing strategies with a health and lifestyle development approach among women was 58.

Table 4. Initial Statements, Concepts, and Main Categories of Social Marketing Strategies with a Health and Lifestyle Development Approach

Initial Statements	Concepts	Main Categories	General Dimension
Targeted and regulated allocation of the share of each governmental sector in participation; use of information technology; program compatibility with the audience; definition of headings and detailed subcomponents; existence of a strong team	Planning	Operational strategies	Social marketing strategies with a health and lifestyle development approach among women
Establishment of morning exercise stations; provision of disease-prevention programs; nutrition programs; sports and mobility-related programs	Service provision	Operational strategies	Social marketing strategies with a health and lifestyle development approach among women
Use of socially acceptable role models; use of cyberspace and distance/virtual education; raising public awareness through media and communication channels	Advertising and awareness-raising	Operational strategies	Social marketing strategies with a health and lifestyle development approach among women
Necessary studies by organizations to gain sufficient and effective knowledge of audiences; design and implementation of a sport-related health monitoring and follow-up system; allocation of a legal status for health in the Ministry of Sport; determination and allocation of the sport sector's share of health-plan	Activities of governmental bodies and nonprofit organizations	Technical strategies	Social marketing strategies with a health and lifestyle development approach among women

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financial credits; provision of facilities to interested sports investors; encouragement and obligation of workplaces to promote physical activity and sport; training specialized and committed human resources; construction of recreational and sports complexes; follow-up programs; approval of supportive laws in the sport sector			
Consumer needs; needs and priorities of the organization or company; community needs; identification of patterns among target audiences; needs assessment	Identification of target audiences	Technical strategies	Social marketing strategies with a health and lifestyle development approach among women
Provision of skilled human resources in the field of sport and diseases; establishment of health monitoring and counseling centers for citizens; joint programs with the health and treatment sector; holding educational and health courses for physicians	Cooperation between the sport sector and health and treatment sector	Inter-organizational operational strategies	Social marketing strategies with a health and lifestyle development approach among women
Obligation to observe sports guidelines in education and universities; obligation to establish student and university sports organizations; institutionalization of physical education courses in schools and universities; cooperation with the Ministry of Agriculture Jihad in nutrition programs	Participation in decision-making	Inter-organizational operational strategies	Social marketing strategies with a health and lifestyle development approach among women
Holding school and university sports competitions; cooperation with municipalities in designing healthy and active urban spaces; cooperation between the sport sector and the national broadcasting organization and mass media for awareness-raising; training and employing specialized and committed physical education instructors; cooperation with cultural affairs authorities	Interaction and cooperation among organizations	Inter-organizational operational strategies	Social marketing strategies with a health and lifestyle development approach among women

Holding school and university sports competitions; cooperation with municipalities in designing healthy and active urban spaces; cooperation between the sport sector and the national broadcasting organization and mass media for awareness-raising; training and employing specialized and committed physical education instructors; cooperation with cultural affairs authorities Interaction and cooperation among organizations Inter-organizational operational strategies Social marketing strategies with a health and lifestyle development approach among women

As shown in the Shannon matrix (Figure 1), social health and cultural consequences, with importance coefficients of 15 and 12, had the highest importance coefficients among the extracted categories in the section of the consequences of social marketing with a health and lifestyle development approach among women. Finally, 53 statements were reported as the total importance coefficient in the section of consequences of social marketing with a health and lifestyle development approach.

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Table 5. Initial Statements and Main Categories of the Consequences of Social Marketing with a Health and Lifestyle Development Approach

Consequences of a Healthy Lifestyle	Main Categories	General Dimension
Progress of individuals, especially in sport; increased social identity; increased social participation; increased social acceptance; increased social cohesion; increased social flourishing; increased social solidarity; respect for the rights of others; strengthening team spirit; lawfulness; strengthening social relationships; social responsibility; internalization of social norms	Social health	Consequences of social marketing with a health and lifestyle development approach
Changing an unhealthy lifestyle into a healthy one; gaining public trust in society; changing people's awareness regarding engagement in physical activity; achieving health and a healthy lifestyle; behavior control; maintaining and strengthening behavior; behavior formation	Behavioral change	Consequences of social marketing with a health and lifestyle development approach
Increased efficiency of production and service sectors; development of an organization's brand; reduction of treatment costs	Economic	Consequences of social marketing with a health and lifestyle development approach
Raising a healthy generation; change in attitude; expansion of the culture of environmental protection; promotion of a healthy lifestyle culture; promotion of sports culture	Cultural	Consequences of social marketing with a health and lifestyle development approach
Creation and development of behavioral and mental health; attainment of spiritual health; having a happy society and preventing depression; control of thoughts and emotions; stress management; reduction of aggression	Psychological	Consequences of social marketing with a health and lifestyle development approach
Proper sleep schedule; greater attention to physical health; tendency toward a healthy diet	Physical	Consequences of social marketing with a health and lifestyle development approach

No.	Interview Code	Total Number of Codes	Number of Agreements	Recoding Reliability (%)
1	P2	21	16	76%
2	P5	19	16	85%
3	P8	24	18	75%
4	P14	14	11	79%
Total		78	61	78%

After extracting and identifying the codes, concepts, and main categories based on Charmaz's conceptual model, the researcher proceeded to present the tree diagram extracted from MAXQDA software, version 2020. Figure 2 illustrates the research model in the qualitative section, presenting the model of "social marketing with a health and lifestyle development approach among women.

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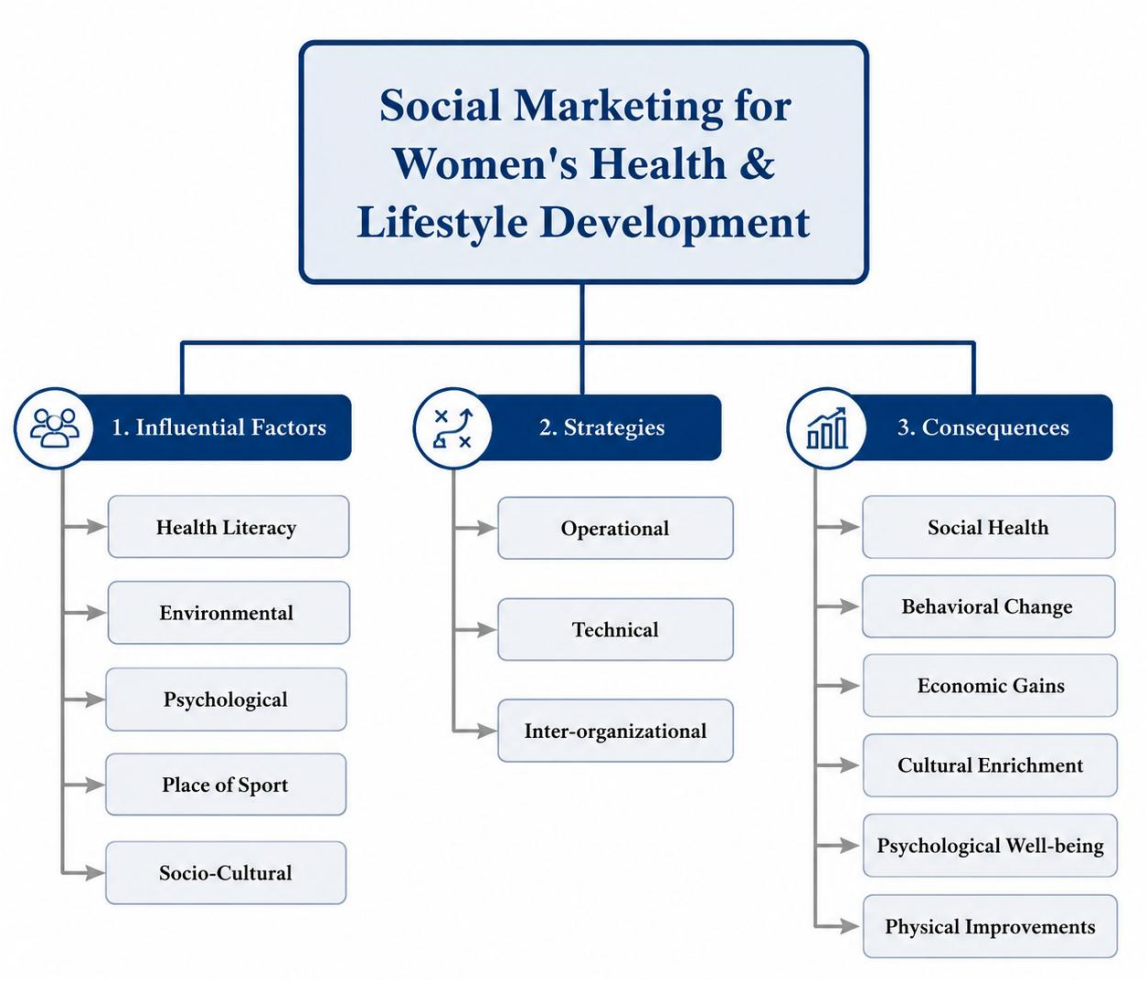


Figure 2. Concepteul model of social marketing for women s health and life style development

Discussion and Conclusion

The result of open coding of the collected content—that is, the conducted interviews—was the extraction of 201 initial statements with a frequency of 278 in the sections of influential factors, strategies, and consequences of social marketing with an approach to the development of health and lifestyle among women. After applying some necessary modifications, this number was ultimately reduced to 165 initial statements with a total frequency of 221. In fact, according to the opinions of specialists and experts in the field, it was determined that some statements shared the same meaning and concept; therefore, one of them was removed.

Afterwards, the content of the conducted interviews was analyzed based on the perspectives of Glaser and Charmaz, namely grounded theory. The result indicated the identification of three main categories in the sections of influential factors, strategies, and consequences of social marketing with an approach to health and lifestyle development among women. In this regard, it was found that each of the mentioned categories consisted of subcategories, concepts, and various statements, which are discussed below.

The findings obtained from axial and selective coding in the content analysis process—related to the first and second research questions—showed that the main category of factors affecting social marketing with an approach to health and lifestyle development among women consisted of five subcategories: level of health literacy, environmental factors, psychological factors, the

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place of sport in an individual's life and engagement in physical activities, and cultural and social conditions.

In fact, the results of the study indicated that 88 initial statements with a frequency of 110 included five main categories: level of health literacy, environmental factors, psychological factors, the place of sport in an individual's life and engagement in physical activity, and cultural and social conditions. In addition, 18 concepts were identified as concepts affecting individuals' lifestyle and health development through social marketing. These concepts included: media literacy, information sources, social factors, individual knowledge, demographic factors, individual lifestyle and personal growth, motivational factors, psychological variables, positive self-perceptions, facilitators of physical activity, access and equipment, tendency to engage in physical activity, habit of physical activity, positive perceptions of physical activity, family, and economic status.

Among these, the level of health, with a frequency of 18, was introduced as one of the main indicators of social marketing that affects individuals' health and lifestyle through sport. This finding was consistent with the results of Saei et al. (1399), Zartoshtian et al. (1396), Domgan (2021), and Shin et al. (2009). Saei et al. (1399) stated in their study that poor health literacy among citizens can lead to increased treatment costs for various physical and mental illnesses, as well as a reduction in preventive behaviors in the future. Individuals with higher literacy levels and access to social platforms were found to possess health-level factors such as skill level, decision-making, access, comprehension, reading, and evaluation. Poor health literacy in individuals can lead to an increase in various physical and psychological problems and a reduction in preventive behaviors in the future.

In the present study, the category of health level was related to concepts such as social factors, individual knowledge, media literacy, and information sources. In this regard, Zartoshtian et al. (1392) stated that the higher the level of media literacy, the greater the search for and acquisition of health information on the internet and in cyberspace. Domgan (2021) also stated in a study that social marketing accelerates behavior change through media and communication technologies (Domgan, 2021).

The ability to create messages, the extent of individuals' agreement with different media, the level of trust people have in media, and the extent of their media use were identified as indicators affecting citizens' media literacy. A healthy lifestyle requires a wide range of abilities, competencies, and nutritional literacy, which refers to individuals' capacity to access, process, and understand dietary information. Sport and physical activity can moderate and improve the fight against chronic diseases, which are among the most important challenges of the twenty-first century. The fact that individuals' level of health literacy is an important factor in terms of social well-being is essential, and it can also be effective in improving nutritional literacy through individuals' media literacy.

Another concept related to individuals' health level is information sources. Consultation with specialists, media content analysis, and the role of peers in providing information are among the indicators identified for information sources. Today, social media can serve as a powerful tool for providing individuals with information aimed at changing their behaviors. Moreover, social marketing, with the aim of correcting the audience's attitude in the field of health in order to create behavioral change for maintaining individual and community health, can take place through these information sources.

In fact, the main responsibility of social marketers in the field of sport and physical activities is to ensure that social marketing interventions meet the needs of individuals and customers in the field of sport. Undoubtedly, information sources—including specialists in sport and health, friends and family, and most importantly social media—can be effective

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in advancing this goal. This finding is consistent with the results of Abdi et al. (2020). They stated that health and sport specialists use specific models to assess the overall effects of diet and exercise on health.

Another concept extracted in relation to health literacy was social factors. Undoubtedly, individuals' place of residence and participation in activities, the income level of individuals and families, individuals' status relative to the poverty line in society, and the social class of individuals and families are among the indicators mentioned in the category of social factors, which were also addressed in the present study. This finding is consistent with the results of Saei et al. (1399).

Social marketing is a set of evidence-based concepts and principles that provides a systematic approach to understanding behavior and modifying it for social benefit. By influencing personal behaviors, it seems to be a key to achieving social transformations (Petrescu et al., 2021). This is mainly because external factors affect consumers' choices and actions, and without changing these factors, no transformation is possible. Naturally, factors such as individuals' income level, poverty line, and social class are among these factors and can affect individuals' behavioral change in improving their health and lifestyle.

Another concept extracted in explaining the category of health literacy was individual knowledge. The knowledge individuals acquire during different levels of education, or their language skills, along with technological and communication skills, are among the indicators affecting individual knowledge in explaining the category of health literacy. This finding is consistent with the findings of Saei et al. (1399) and Shin et al. (2009). Shin et al. (2018) stated that citizens with lower individual knowledge use health-related information-seeking tools significantly less than others. Therefore, it seems logical that an indicator such as individual knowledge is also influential in this category.

On the other hand, the qualitative results of the study showed that one of the categories affecting individuals' lifestyle and health development through a social marketing approach was environmental factors. This finding is consistent with the results of Jamaat et al. (1396). In the mentioned study, environmental factors—including managerial-environmental, cultural, social, and economic factors—were identified as factors affecting participation in sport based on the marketing mix.

Aire et al. (2004) also showed in their research that children's physical activity is influenced by environmental factors. Their results also showed that physical environmental factors such as poor access, neighborhood quality, safety, and social environmental factors such as violent neighborhoods involving crime and antisocial behaviors cause children to choose inactive indoor activities such as watching television.

In the present study, demographic factors—explained by indicators such as ethnicity and race, education level of individuals and families, marital status, gender, and age—were introduced as one of the factors affecting health and lifestyle development through the social marketing approach in sport. In this regard, Djokic et al. (2020) examined physical activity as an ordered dependent variable—namely inactive, low-frequency activity, and recommended-frequency activity—and investigated its relationship with students' gender, age, house size, emotional status, place of residence, year of study, and standard of living. They observed that 15.7% of students were inactive, 22.9% had low-frequency activity, while 61.3% met the recommended level of physical activity. They also stated that the average likelihood of physical activity among male students was higher compared to female students. Students with better living standards were also more physically active.

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Ultimately, they found that students' emotional status influenced their physical activity. The results also indicated that physical activity was significantly related to student status, gender, age, marital status, socioeconomic level, and mother's education.

In addition, another concept extracted in explaining environmental factors was individual lifestyle. Proper nutrition, avoidance of illicit relationships, proper sleep habits, avoidance of tobacco use, and knowledge and awareness regarding lifestyle explain this concept and influence individuals' health and lifestyle development through a social marketing approach. This part of the findings is consistent with the results of Ramirez et al. (2017). They considered social marketing effective in changing harmful behaviors, including unhealthy dietary patterns and lack of beneficial physical activity. Pang and Pojak (2015) considered social marketing a factor in reducing tobacco and alcohol consumption, illegal drug use, and increasing the level of physical activity (Pang & Pojak, 2015).

One reason why research in the field of social marketing—especially in relation to physical activity and engagement in sport—has increased significantly is the existence of mortality caused by poor nutrition, unhealthy lifestyles, tobacco and alcohol consumption, and similar factors. Therefore, sports marketing seeks to have a positive and significant impact on health development and healthy lifestyle through changing such behaviors. Overall, social marketing creates changes across a wide range of society, increases social identity in the community, and can generate creative ideas in different areas of healthy lifestyle, enabling both society and its target audiences to benefit from social marketing.

One of the concepts discovered and extracted in the present study in explaining sports social marketing intervention and its role in individuals' lifestyle and health development was personal growth. Personal growth in individuals occurs through the development of physiological factors, individual and social hygiene, and acquisition of life skills. Alongside these, it is made possible through cultural and religious identities, knowledge acquisition—as mentioned in previous categories—and educational development. Physical activities contribute to individuals' personal growth in all dimensions of life. According to World Health Organization statistics, 3.2 million people worldwide suffer from physical inactivity, and this issue has caused mortality and chronic diseases around the world (World Health Organization, 2015). Kubacki et al. (2017) stated in their study that social marketing leads to positive behavioral change in individuals, and this behavioral change manifests itself through participation in physical activity, leading to physiological growth, personal hygiene, and life skills.

Another part of the qualitative results of the study indicated that psychological factors play an effective role in health and lifestyle development through the sports social marketing approach. Motivational factors were one of the concepts extracted in this section. One of the indicators of motivational factors is individuals' social interactions. In fact, one of the motivations for individuals to participate in physical activities is interaction and communication with peers and, more generally, with members of society.

Another motivation for individuals to participate in physical activities is maintaining health and physical fitness. Physical appearance affects not only individuals' social interactions, but also their psychological status and health. Appearance is an important factor in evaluating others, and when physical appearance is more positive, physical self-esteem and overall self-esteem increase. Therefore, the relationship between physical appearance and self-esteem is strong, and both men and women consider it important. Since appearance becomes important in the process of self-expression while performing one's role through interaction with others, individuals increase their satisfaction through active skin care, cosmetic surgery, and weight

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management in order to overcome the gap between their ideal physical appearance and their actual self. In other words, appearance affects individuals' mental health to the extent that it can be said that those who have an attractive appearance enjoy greater self-confidence and have more successful social lives (Seong-Ku & Lee, 2015).

Gaining vitality and happiness is another indicator for evaluating the concept of motivational factors in individuals' participation in physical activity for health and lifestyle development. Undoubtedly, with increased sports participation—especially in physical activities that occur alongside others—one cannot ignore the improvement of vitality and happiness. Research has consistently emphasized that physical activities are an effective factor in increasing vitality and happiness among members of society.

It was further found that another concept explaining psychological factors is psychological variables. For example, having a positive body image can be considered a determining factor in individuals' participation and behavioral change through physical activity. This finding was consistent with the results of Akataran (2018). In his study, he stated that body image refers to the degree to which individuals perceive their own body. Body perception may lead to satisfaction, dissatisfaction, or a state between the two, and includes two aspects of body image: perception and attitude. A positive and satisfying image of the body enables individuals to see their body correctly and therefore feel relaxed and satisfied with their appearance. Seeing the body positively provides a proper and specific understanding of the body. Individuals accept their bodies as they are and feel comfort and pride; therefore, this enables a person to accept their unique body and avoid wasting excessive time complaining about their weight and body appearance. They can feel comfortable and confident about the boundaries of their body (Akataran, 2018).

Therefore, this category leads to combating psychological illnesses, especially depression; satisfying needs and emotions; providing psychological welfare and comfort; meeting interpersonal relationship needs; and promoting self-control. All of these are regarded as psychological indicators of social marketing in individuals' health and lifestyle development, which were addressed in the present study.

Positive self-perceptions were identified as one of the concepts explaining the psychological factor affecting health and healthy lifestyle development through the sports social marketing approach. Positive self-image includes several main constructs such as body appreciation, body pride, and body acceptance. The main aspect of positive body image is body appreciation, which is defined as accepting, having favorable opinions about, and respecting one's body; resisting sociocultural pressures to internalize stereotypical beauty standards as the only form of human beauty; and appreciating the body's function and health (Jankauskiene et al., 2020). Developing body appreciation requires creating a skill through which individuals can deeply attune to their internal experiences and provide themselves with the care they need, ultimately leading to more sustainable changes in individuals' ability to care for themselves and improve their health. The study by Avalos et al. (2005) showed that positive body image is associated with greater self-esteem and active coping. Men usually report greater body appreciation compared to women (He et al., 2020). In the present study, positive self-image was explained through indicators such as body control and monitoring, individual vitality, life satisfaction, lack of dependence on others, and feeling good.

In addition to the above, the results of the study indicated that the place of sport in an individual's life and engagement in physical activities is another indicator affecting health and lifestyle through the sports social marketing approach. This indicator was characterized by concepts such as facilitators of

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physical activity, access and equipment, tendency to engage in physical activity, habit of physical activity, and positive perceptions of physical activity. The results of this part of the findings were consistent with the results of Deering et al. (2006) and Kubacki (2016).

According to the studies of these researchers, one of the most important approaches to overcoming barriers to physical activity and facilitating participation in physical activity is social marketing (Kubacki, 2017). In fact, social marketing includes commercial marketing concepts and techniques for voluntary behavior change involving a social good (Kotler et al., 1971). Social marketing is used to address a wide range of health-related issues at the community level and is specifically applied to create positive behavioral changes, including increasing levels of physical activity (Stead et al., 2007). In this regard, the studies of Fujihira et al. (2015) and Grier and Bryant (2005) also support the obtained result, as they reached similar findings in their studies.

The findings showed that sports coaches, physicians, popular athletes, television, and family are considered facilitators of physical activity and can assist individuals in participating in physical activities. In fact, facilitators of physical activity are among the main pillars of social marketing in sport.

Another concept extracted in the section of the place of sport in an individual's life and engagement in physical activity was access and equipment, which is consistent with the study of Adiyati (2018). The existence of a suitable environment for physical activities, especially walking and exercise; availability of welfare facilities accessible by walking; pleasantness of sports spaces and venues; and easy access to sports facilities, especially neighborhood parks, can be useful in changing individuals' behavior toward participation in physical activities aimed at health and healthy lifestyle development.

Adiyati (2018) stated in his study that one of the places for achieving psychological relaxation, physical activity, variety and recreation, vitality and happiness, and social interactions is sports venues, spaces, and parks. These places can provide a space free from tension and stress for different social groups and age groups. Regular physical activity is important for both physical and mental health. Public parks may play an important role in facilitating physical activity because they provide places for people to walk or run, and many of the specific facilities required for sport and other serious activities are available there. Therefore, access and sports equipment are effectively beneficial in changing individuals' behavior toward participation in physical activity.

Furthermore, tendency to engage in physical activity was another concept identified in the present study as an effective component in explaining the main category of the place of sport in an individual's life and engagement in physical activities. Individual feelings toward physical activity, occupation, number of family members, education, marital status, age, gender, and habit of physical activity were introduced as indicators explaining the tendency to engage in physical activity.

Scarapicchia et al. (2015) stated that changing individuals' behavior toward exercising in sports groups begins with awareness of sports groups and a tendency toward physical activities. This process then continues through intervening variables such as outcome expectations and ultimately leads to the performance of a behavior. Therefore, according to Scarapicchia et al. (2015), awareness is created when individuals become familiar with the brand and logo of sports groups or are able to recognize and identify them. In other words, tendency toward physical activity and awareness lead to changes in mediating variables such as subjective norms and attitudes among the target group. Through creating awareness of the activities of social groups, their goals, and the types of activities performed in these

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groups, this in turn leads to participation in physical activities (Bauman et al., 2008). Therefore, tendency to engage in physical activity and awareness of its benefits can be effective in changing individuals' attitudes toward participation in physical activities for health and healthy lifestyle development.

It was further found that habit of physical activity is another concept identified as affecting the place of sport in an individual's life and engagement in physical activities in relation to health and healthy lifestyle development. Absence of physical problems, such as physical disability; importance of physical activity; beliefs and attitudes toward physical activity; participation in physical and sports activities; development of a continuous daily activity habit; and habit of physical activity at work were considered indicators explaining this concept.

The results of this finding were consistent with the results of Mahdizadeh et al. (1393), Kim et al. (2021), Dashti Khavidaki et al. (1399), Van Tuyckom (2011), Anderson (1995), and Parnell (2016). The epidemic of inactivity is a complex issue and has created many challenges for organizations responsible for leisure, health, and sport. A major part of sport that is closely related to community health and vitality, and in which many of the basic functions of sport are summarized, is sport for all or sport for everyone (Mahdizadeh et al., 1393). Undoubtedly, regular participation in leisure activities leads to improved health and mental health (Kim et al., 2021). Leisure and sports activities, as a tool, have many effects on human physical and mental health and prevent many diseases, including psychological and neurological disorders, thereby improving human quality of life (Dashti Khavidaki et al., 1399). In fact, the selection of the approach and the tendency of developed countries toward recreational sports in a standardized manner have been aimed at improving individual health and quality of life (Van Tuyckom, 2011). In this regard, a new approach in marketing called social marketing can be used to change lifestyle (Anderson, 1995). In the field of sport as well, examining social marketing methods can be useful for improving changes in physical activity patterns and facilitating the transition from inactive lifestyle patterns to physical activity (Parnell, 2016). Thus, one of the tools for changing individuals' attitudes and behaviors regarding participation in physical activities is their habits related to physical activity.

Finally, according to the qualitative findings of the study, another influential category was cultural and social conditions affecting health and healthy lifestyle development. These conditions included concepts such as family, environmental conditions, and economic status. Families, by granting their children permission to engage in sport, are considered a fundamental encouragement in the upbringing of children and, in fact, teach the promotion of a healthy lifestyle. Undoubtedly, the literacy and education level of families, their lifestyle, and their performance in the field of health development can be transferred to their children.

Alongside the family, environmental conditions—including the role of friends in engaging in sports activities, social support, poor social conditions, family responsibilities such as caring for parents or siblings, urban or rural life, individual social class, conformity of behavior with social norms and acceptance by the environment, and changes in the social environment—can also play a significant role in changing individuals' behavior toward participation in physical activities. Economic status, together with the two previous concepts, is considered one of the concepts affecting participation in physical activities.

At the end of this section, and considering the aforementioned points, it is recommended that officials in the fields of health and hygiene, as well as the Ministry of Sport and Youth, cooperate with advertising organizations and national and social media to improve the individual knowledge of families and individuals, their education level,

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media literacy, and information sources while taking social factors into account. It is also suggested that sports organizations, including sports federations and especially the Federation of Sport for All, design and implement public programs and festivals throughout the country by considering demographic characteristics such as ethnicity and race, marital status, gender, and physiological and motivational factors. Establishing a database and information resources on the economic, social, and environmental characteristics of citizens in different cities can serve as influential components in changing individuals' behavior toward citizens' participation in physical activity.

The results of this study addressed the place of sport in individuals' lives and engagement in physical activity as a personal category. Therefore, it is recommended that the results of this study be provided to individuals in the form of health brochures in all health-related institutions and organizations. Preparing such brochures is particularly important in relation to issues such as the importance of habit of physical activity, tendency to engage in physical activity, and families' positive perceptions of physical activity.

The findings obtained from axial and selective coding in the content analysis process—related to the third and fourth research questions—showed that the main category of social marketing strategies with an approach to health and lifestyle development among women consisted of three subcategories: operational strategies, technical strategies, and inter-organizational operational strategies.

In principle, every organization defines specific strategies to achieve its intended goals and aligns all its efforts and resources toward the optimal implementation of those strategies. Accordingly, in order to achieve health development and a healthy lifestyle for women in the country, various organizations are required to optimally implement the strategies formulated for them.

In the present study, based on the opinions of experts in this field, one of the proposed strategies was operational strategies, in which emphasis was placed on three specific factors: planning, service provision, and advertising and awareness-raising. Regarding the planning factor, it is necessary to consider the targeted and legally regulated allocation of the share of each governmental sector in participation, as well as the use of information technology, program compatibility with the audience, definition of headings and detailed subcomponents, and the existence of a strong team.

In the service provision factor, activities such as establishing morning exercise stations, providing disease-prevention programs, and offering nutrition, sports, and mobility-related programs—especially programs related to women's mobility—can be effective and facilitate part of the mission of promoting women's healthy lifestyle.

Finally, advertising and awareness-raising is another operational strategy. In this regard, it is suggested that by using socially acceptable role models, cyberspace, distance and virtual education, and raising public awareness through media and communication networks, awareness in society—especially among women—should be enhanced, and subsequently, women's healthy lifestyle should be improved.

Considering the above, it is suggested that various organizations responsible for women's health and sport should provide the necessary grounds for promoting women's healthy lifestyle by appropriate planning, providing services through the establishment of morning exercise stations and various nutrition and sports programs, and raising women's awareness about the importance of sport and physical activity for health through mass media.

Another strategy considered by experts was technical strategies. In this type of strategy, it seems necessary to specify the activities of governmental bodies and nonprofit organizations and to identify

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target audiences so that proper and appropriate planning can be carried out for them.

Accordingly, necessary studies by organizations to gain sufficient and effective knowledge of audiences; design and implementation of a sport-related health monitoring and follow-up system; allocation of a legal position for health in the Ministry of Sport; determination and allocation of the sport sector's share of financial credits in the health plan; provision of facilities to investors interested in sports fields; encouragement and obligation of workplaces to promote physical activity and sport; training specialized and committed human resources; construction of recreational and sports complexes; and approval of supportive laws in the sport sector can be highly effective.

Moreover, by accurately identifying consumer needs, the needs and priorities of organizations or companies, community needs, and the patterns of target audiences, needs assessment in relation to health and sport should be conducted in general so that the target community can be correctly identified and specialized and specific planning can be carried out for them. Therefore, it is recommended that the Ministry of Sport and Youth, in cooperation with the Ministry of Health and Medical Education, conduct a sports needs assessment for women in the country and, based on it, plan the activities of related governmental and nongovernmental organizations under the two ministries.

Finally, the last strategy proposed by the research experts was presented in the form of inter-organizational operational strategies. In this regard, cooperation between the sport sector and the health and treatment sector is essential. Activities such as providing skilled human resources in the field of sport and diseases, establishing health monitoring and counseling centers for citizens, developing joint programs with the health and treatment sector, and holding educational and health courses for physicians can be effective.

It is also necessary for organizations responsible for sport and physical activity in the country—especially the Ministry of Sport and Youth and the Ministry of Education—to actively participate in decision-making related to the healthy lifestyle of members of society. For this purpose, enforcing sports guidelines in schools and universities, obligating the establishment of student and university sports organizations, institutionalizing physical education courses in schools and universities, and cooperating with the Ministry of Agriculture Jihad in nutrition programs can be considered logical and acceptable activities.

Alongside active cooperation and participation in decision-making, it seems that interaction and cooperation among various organizations in the country is also essential and vital, because without proper interaction and cooperation, many anticipated goals cannot be achieved. Accordingly, special activities such as holding school and university sports competitions, cooperating with municipalities in designing healthy and active urban spaces, cooperation between the sport sector and the national broadcasting organization and mass media to raise public awareness, training and employing specialized and committed physical education instructors, and cooperating with cultural affairs authorities should be considered by the relevant officials.

Considering the above, it is suggested that the Ministry of Sport and Youth, in addition to comprehensive and active participation in macro-level decision-making related to public health, establish appropriate interaction with various organizations and institutions in the country for holding different sports competitions, training expert coaches and sports instructors, improving the community's movement literacy and health- and sport-related information, and similar activities.

In the continuation of the study, the findings obtained from axial and selective coding in the content analysis process—related to the fifth and

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sixth research questions—showed that the main category of consequences of social marketing with an approach to health and lifestyle development among women consisted of six subcategories: social health, behavioral change, economic consequences, cultural consequences, psychological consequences, and physical consequences.

In fact, the positive and valuable consequences of social marketing with an approach to women's health and healthy lifestyle development can be discussed in six different dimensions. The obtained result was consistent with the findings of Saberi et al. (1397), Zarei et al. (1395), and Rezaei Pandari et al. (1393). Saberi et al. (1397), in a study titled "Understanding the Process of Formation of Social Marketing for the Development of Sport for All," concluded that the resulting consequences included social consequences and changes in individual attitudes and behavior. Zarei et al. (1395), by presenting a model of factors affecting the integrated implementation of the social marketing mix in the field of health, found that behavioral change and behavioral intentions can be among its consequences. In addition, Rezaei Pandari et al. (1393), in a study titled "Application of the Social Marketing Approach in the Field of Health: A Review Study," reached a similar conclusion regarding the consequence of changing certain behaviors.

One of the dimensions of the consequences of social marketing with an approach to health and lifestyle development is social health. It seems that social marketing with an approach to women's health and lifestyle development generally leads to the improvement of social health in society. This social health can be observed in individuals' progress, especially in sport; increased social identity; increased social participation; increased social acceptance; increased social cohesion; increased social flourishing; increased social solidarity; respect for the rights of others; strengthening team spirit; lawfulness; strengthening social relationships; social responsibility; and internalization of social norms.

From another perspective, it seems that social marketing with an approach to women's health and lifestyle development can lead to behavioral change among members of society. This behavioral change can be observed in changing an unhealthy lifestyle into a healthy one, gaining public trust in society, changing people's awareness of engagement in physical activity, achieving health and a healthy lifestyle, behavior control, maintenance and strengthening of behavior, and ultimately the formation of behavior among members of the target community.

In addition to the two mentioned consequences, it seems that social marketing with an approach to women's health and lifestyle development also leads to positive economic consequences. It is expected that after improving women's health and healthy lifestyle through social marketing, the country will witness increased efficiency in various production and service sectors, development of an organization's brand, and reduction of national treatment costs. Therefore, it seems logical that organizations responsible for improving women's health in society should undertake the necessary planning and allocate the required costs.

From another dimension, cultural consequences can also be expected from social marketing with an approach to women's health and lifestyle development. In fact, it seems that by improving the health and lifestyle of women in the country through various methods such as social marketing, one can hope for raising a healthy generation, changing attitudes, expanding the culture of environmental protection, promoting the culture of healthy lifestyle, and enhancing the culture of sport. This is because, first, women constitute almost half of the country's population; and second, women either currently or in the future play the role of mothers in the family and can have many positive effects on the behaviors of other members of society. Children

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always consider their parents as behavioral role models. Therefore, if their mothers have a healthy and active lifestyle, children usually follow the same lifestyle and obtain its other benefits as well.

In this regard, psychological consequences and physical consequences constitute other dimensions of social marketing with an approach to women's health and active lifestyle. Regarding psychological consequences, one can refer to the creation and development of behavioral and mental health, attainment of spiritual health, having a happy society and preventing depression, control of thoughts and emotions, stress management, and reduction of aggression. In the dimension of physical consequences, one can observe proper sleep patterns, greater attention to physical health, and a tendency toward a healthy diet among women.

Accordingly, it can be stated that the positive and valuable benefits of social marketing with an approach to women's health and lifestyle in the country are so numerous that the government should allocate an appropriate budget for it and require the responsible organizations—especially the Ministry of Sport and Youth, the Ministry of Education, the Ministry of Health and Medical Education, and other related bodies—to implement the relevant programs.

Therefore, it is recommended that the Ministry of Sport and Youth and other organizations related to women's sport use social marketing to provide the grounds for improving social health, changing women's behavior from an unhealthy lifestyle to a healthy one, and achieving other positive behaviors and consequences.

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